

Summary of Academic Achievement and Functional Performance

To be given to IDEA eligible students who graduate with a regular high school diploma or exit the school system at maximum age (22)

Student Name: _____	Date of Birth: _____	Year of Graduation/Exit: _____
Address: _____		
(Street)	(Town, state)	(Zip code)
Telephone Number: _____	Primary Language: _____	
Current School: _____	City: _____	
Student's primary disability: _____		
Date this Summary was completed: _____		
This form was completed by: Name: _____ Title: _____		
School: _____		Telephone Number: _____

Summary of Academic Achievement and Functional Performance

Area(s) of need	Present Level of Performance, including baseline data and how the disability affects access and progress in the general curriculum

Accommodations, including Assistive Technology**Student's Postsecondary Goal(s)**

Career choice:

Housing preference:

Leisure activities:

Recommendations to assist the student in meeting postsecondary goals